Fill in this	information to identify your case:	C	heck one box only as	directed in this form and	in Form
Debtor 1	Barry Scott Stollberg		22A-1Supp:		
Debtor 2			■ 1. There is no pre	sumption of abuse	
(Spouse, if filing) United States Bankruptcy Court for the: Western District of Pennsylvania			\square 2. The calculation to determine if a presumption of abuse		
Case num	· ,			made under <i>Chapter</i> 7 ifficial Form 122A-2).	Means Test
(if known)	22-10304			st does not apply now be ry service but it could ap	
			☐ Check if this is	an amended filing	
Officia	l Form 122A - 1				
Chapt	er 7 Statement of Your Cu	irrent Monthly In	come		12/1
ease number qualifying repart 1: 1. Wha N M M	carate sheet to this form. Include the line number to be (if known). If you believe that you are exempted finilitary service, complete and file Statement of Exer Calculate Your Current Monthly Income to is your marital and filing status? Check one of married. Fill out Column A, lines 2-11. Carried and your spouse is filing with you. Fill arried and your spouse is NOT filing with you.	rom a presumption of abuse becamption from Presumption of Abus only. out both Columns A and B, line i. You and your spouse are:	ause you do not have pr se Under § 707(b)(2) (Off	imarily consumer debts o icial Form 122A-1Supp) w	or because of
	Living in the same household and are not le	, ,	, , , , , , , , , , , , , , , , , , , ,		
	Living separately or are legally separated. Fi penalty of perjury that you and your spouse are living apart for reasons that do not include evad	e legally separated under nonba	ankruptcy law that appl	lies or that you and your	
101(10A the 6 mc	he average monthly income that you received from a). For example, if you are filing on September 15, the 6- onths, add the income for all 6 months and divide the to own the same rental property, put the income from tha	month period would be March 1 threat by 6. Fill in the result. Do not incl	ough August 31. If the amude any income amount r	nount of your monthly incommore than once. For examp	ne varied during ble, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before a payroll deductions). 			\$ 0.00	\$	
	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.		\$ 0.00	\$	
of you from and	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.			\$	
1	ncome from operating a business, profession	n, or farm			
		Debtor 1 \$ 0.00			
	s receipts (before all deductions)	-\$ 0.00			
	nary and necessary operating expenses nonthly income from a business, profession, or fa	0.00	> \$ 0.00	\$	
	ncome from rental and other real property	· · ·	*	· ———	
		Debtor 1			
Gros	s receipts (before all deductions)	\$0.00			
Ordir	nary and necessary operating expenses	-\$ 0.00	_		
Net r	monthly income from rental or other real property	\$0.00 Copy here -	· ———	\$	
7 Inter	est dividends and royalties		\$ 0.00	\$	

7. Interest, dividends, and royalties

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22-10384

Case number (if known)

Barry Scott Stollberg Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 1,928.67 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,928.67 1.928.67 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,928.67 Multiply by 12 (the number of months in a year) **x** 12 23.144.04 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. PΑ Fill in the number of people in your household. 1 66.454.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Barry Scott Stollberg **Barry Scott Stollberg** Signature of Debtor 1

Debtor 1

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Debtor 1 Barry Scott Stollberg Case number (if known) 22-10384

Date September 28, 2023

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Barry Scott Stollberg Case number (if known) 22-10384

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2023 to 08/31/2023.

Line 8 - Unemployment compensation (included in CMI)

Source of Income: Unemployment

Income by Month:

6 Months Ago:	03/2023	\$526.00
5 Months Ago:	04/2023	\$2,630.00
4 Months Ago:	05/2023	\$2,104.00
3 Months Ago:	06/2023	\$2,104.00
2 Months Ago:	07/2023	\$2,104.00
Last Month:	08/2023	\$2,104.00
	Average per month:	\$1,928.67